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Alison Lundergan Grimes Kentucky Secretary of State

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COMMONWEALTH OF KENTUCKY ELAINE N. WALKER, SECRETARY OF STATE

Division of Corporations Business Filings PO Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Articles of Org Limited Liabili			KLC
Pursuant to KRS 14A and KRS 2	275, the undersigned	applies to qualify and for that purpo	se submits the fo	ollowing statements
Article I: The name of the limited				
RCC BIG SHOAL, LL	· · · · · ·			
Article II: The street address of	be Beste J.P. Littl			
Article II: The street address of the limited liability company's initial registered office in Kentu 2716 Old Rosebud STE 201A Lexington K				40500
Street Address Only (No Post Office Box Numbers)		Lexington city	KY	40509
	•	-	State	Zip Code
and the name of the initial registe	ered agent at that offi	ce is Registered Agents I		
		company's initial principal office is		
2716 Old Rosebud ST		Lexington	KY	40509
Street Address or Post Office Box Nun	nber	City	State	Zip Code
Article IV: The limited liability cor	npany is to be mana	ged by (must check one):		
A. a manager(s).				
B. its member(s).				
Article V: This application will be	effective upon filing,	unless a delayed effective date and	l/or time is provid	ed. The effective
date or the delayed effective date	cannot be prior to th	e date the application is filed. The	date and/or time	s 02/13/2014
				(Delayed effective
IMA doctors under namelte et a co	Same a series and a series of the series of			date and/or time)
of Seath	jury under the laws o	of the state of Kentucky that the fore		
Signature of Organizer		David L Farmer, President & CEO 02/12/2014 Printed Name & Title Date		
g		Frinted Name & Title	L	Date
Signature of Organizer		Printed Name & Title)ate
Registered Agents In	C.			
Print Name of Registered Agent	_	, consent to serve as the registered agent		d liability company.
Signature of Degistered Asset	The	Dan Keen - President	02/12/	2014
Signature of Registered Agent	•	Printed Name	Date	
(01/11)				